APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::

REGULAR

Subject Matter::

UTILITY

CD-ROM or CD-R?::

NONE

Title::

PYRAZOLE DERIVATIVES

Attorney Docket Number::

245437US0

INVENTOR INFORMATION

Applicant Authority Type::

INVENTOR

Primary Citizenship Country::

Japan

Status::

FULL CAPACITY

Given Name::

Fumiyuki

Family Name::

SHIRAI

Street of Mailing Address::

c/o Fujisawa Pharmaceutical Co., Ltd., 4-

7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address::

Osaka-shi

State or Province of Mailing Address::

Postal or Zip Code of Mailing Address::

Osaka

Country of Mailing Address::

Japan 541-8514

Primary Citizenship Country::

INVENTOR

Applicant Authority Type::

Japan

Status::

FULL CAPACITY

Given Name::

Hidenori

Family Name::

AZAMI

Street of Mailing Address::

c/o Fujisawa Pharmaceutical Co., Ltd., 4-

7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address::

Osaka-shi

State or Province of Mailing Address::

Osaka

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing Address::

541-8514

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Natsuko Family Name:: KAYAKIRI

Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-

7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka
Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 541-8514

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Kazuo

Family Name:: OKUMURA

Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-

7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka

Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 541-8514

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Katsuya
Family Name:: NAKAMURA

Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-

7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 541-8514

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number::

22850

FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2002953019	Australia	12/02/02	YES
2002-953602	Australia	12/30/02	YES
2003902015	Australia	04/29/03	YES

ASSIGNMENT INFORMATION

Assignee Name:: FUJISAWA PHARMACEUTICAL CO.,

LTD.

Street of Mailing Address:: 4-7, Doshomachi 3-chome, Chuo-ku,

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 541-8514